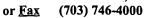
PART B - FEE(S) TRANSMITTAL

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ARMSTRONG, LLP 1725 K STREET, SUITE 1000	S.	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.						
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	2		<u> </u>				(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED IN			ATTORNE	ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/708,593	03/12/2004	Katsutoshi			040091		2592	
APPLN. TYPE	METHOD FOR MANUFACT	ISSUE FE		PUBLICATION FEE		FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300		1700		
				\$300		1 /00	07/15/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS				
ESTRADA,	2823		438-403000					
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica	e address or indication of "Fadence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use	(1) the nar or agents ((2) the nar registered 2 registere	OR, alternatively, me of a single firm (having attorney or agent) and the	s of up to 3 registered patent attorneys, alternatively, of a single firm (having as a member a orney or agent) and the names of up to patent attorneys or agents. If no name is 3 & BROOKS, LLP				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the drecordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) (I) OSAKA PREFECTURE, Osaka, Japan; (B) RESIDENCE: (CITY and STATE OR COUNTRY) (CITY 101 FC: 1501 (CITY 102 FC: 1504 (CITY 103 FC: 8001								
	assignee category or catego				Corporation or	other private gre	oup entity Government	
Issue Fee Publication Fee (No small entity discount permitted)				Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-2340 (enclose an extra copy of this form).				
a. Applicant claims S	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.	b. Applica	ant is no longer claiming S	MALL ENTITY	status. See 37 C	FR 1.27(g)(2).	
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Authorized Signature Mell . (Curing)				Date	July 6, 2			
Typed or printed name _	Registration No. 31,898 is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process)							
in application. Confidentian	on is required by 37 CFR 1.3 ty is governed by 35 U.S.C. oplication form to the USPTO of for reducing this burden, sh	122 and 37 CFR 1	.14. I his coil	lection is estimated to take	e 12 minutes to co	implete, includin	ng gathering, preparing, and	

unis form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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